BEFORE THE ARIZONA MEDICAL BOARD

In the Matter of

IRFAN MIRZA, M.D.

Holder of License No. 28306
For the Practice of Allopathic Medicine
In the State of Arizona.

Case No. MD-14-1195A

ORDER FOR LETTER OF REPRIMAND AND PROBATION; AND CONSENT TO THE SAME

Irfan Mirza, M.D. ("Respondent") elects to permanently waive any right to a hearing and appeal with respect to this Order for a Letter of Reprimand and Probation; admits the jurisdiction of the Arizona Medical Board ("Board"); and consents to the entry of this Order by the Board.

FINDINGS OF FACT

- 1. The Board is the duly constituted authority for the regulation and control of the practice of allopathic medicine in the State of Arizona.
- 2. Respondent is the holder of license number 28306 for the practice of allopathic medicine in the State of Arizona.
- 3. The Board initiated case number MD-14-1195A after receiving a complaint regarding Respondent's care and treatment of five patients ("B.G.", "L.C.", "J.B.", "A.M.", and "M.B.") alleging inappropriate indications for pacemaker implantation, inappropriate indication for a cardiac catheterization, and inappropriate ordering of a stress test.
- 4. In October of 2012, J.B., a 48 year-old obese male with resolved cardiomyopathy, presented to another provider with dizziness. Cardiac evaluation with EKG showed a normal LV function and no significant valvular disease, and a nuclear scan showed normal LV function with an apical perfusion defect. On an exercise stress test, J.B. achieved 12 Mets, and reached a peak heart rate of 164 beats per minute. A subsequent EKG showed a sinus rhythm rate at 60 beats per minute. A Holter monitor was

also utilized showing nighttime bradycardia, and J.B.'s treating physician noted that J.B. would need a pacemaker. Respondent acted as the implanting physician.

- 5. In July of 2012, M.B., an 83 year-old male with hypertension and COPD, presented to another provider with dizziness and a fall of unknown etiology. In 2008, M.B. had a normal EKG, and in 2009, a normal nuclear perfusion scan. Cardiac evaluation via Holter monitor was performed in May of 2012 by M.B.'s primary care physician and revealed a sinus rhythm of 60 to 70 beats per minute in the daytime, and 50 minutes during the nighttime. No critical bradycardia was noted. An episode of SVT at a rate of 130 beats per minute was noted on a follow-up EKG in August of 2012. M.B.'s treating physician recommended a pacemaker. Respondent acted as the implanting physician.
- 6. The standard of care requires a physician to critically review all diagnostic information and to perform a thorough evaluation before proceeding with pacemaker implantation. Respondent deviated from the standard of care by failing to critically review all diagnostic information and by failing to perform a thorough evaluation before proceeding with pacemaker implantations in J.B. and M.B.
- Actual harm occurred in that J.B. and M.B. both underwent an unnecessary pacemaker implantation.
- 8. No deviations from the standard of care were found in Respondent's treatment of B.G., L.C., and A.M. The Board's medical consultant who reviewed Respondent's treatment of B.G. noted a lack of fundamental EKG reading skills.

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CONCLUSIONS OF LAW

- a. The Board possesses jurisdiction over the subject matter hereof and over Respondent.
- b. The conduct and circumstances described above constitute unprofessional conduct pursuant to A.R.S. § 32-1401(27)(q) ("Any conduct or practice that is or might be harmful or dangerous to the health of the patient or the public.").

ORDER

IT IS HEREBY ORDERED THAT:

- 1. Respondent is issued a Letter of Reprimand.
- 2. Respondent is placed on Probation for a period of 6 months with the following terms and conditions:

a. Continuing Medical Education

Respondent shall within six (6) months of the effective date of this Order obtain no less than six (6) hours of Board staff pre-approved Category I Continuing Medical Education ("CME") regarding EKG interpretation. Respondent shall within thirty days of the effective date of this Order submit his request for CME to the Board for pre-approval. Upon completion of the CME, Respondent shall provide Board staff with satisfactory proof of attendance. The CME hours shall be in addition to the hours required for the biennial renewal of medical licensure. The Probation shall terminate upon Respondent's proof of successful completion of the CME.

b. Obey All Laws

Respondent shall obey all state, federal and local laws, all rules governing the practice of medicine in Arizona, and remain in full compliance with any court ordered criminal probation, payments and other orders.

c. Tolling

In the event Respondent should leave Arizona to reside or practice outside the State or for any reason should Respondent stop practicing medicine in Arizona, Respondent shall notify the Executive Director in writing within ten days of departure and return or the dates of non-practice within Arizona. Non-practice is defined as any period of time exceeding thirty days during which Respondent is not engaging in the practice of medicine. Periods of temporary or permanent residence or practice outside Arizona or of non-practice within Arizona, will not apply to the reduction of the probationary period.

3. The Board retains jurisdiction and may initiate new action against Respondent based upon any violation of this Order. A.R.S. § 32-1401(27)(r).

DATED AND EFFECTIVE this ______ day of ______, 2016.

ARIZONA MEDICAL BOARD

Patricia E. McSorley
Executive Director

CONSENT TO ENTRY OF ORDER

- 1. Respondent has read and understands this Consent Agreement and the stipulated Findings of Fact, Conclusions of Law and Order ("Order"). Respondent acknowledges he has the right to consult with legal counsel regarding this matter.
- 2. Respondent acknowledges and agrees that this Order is entered into freely and voluntarily and that no promise was made or coercion used to induce such entry.

- 3. By consenting to this Order, Respondent voluntarily relinquishes any rights to a hearing or judicial review in state or federal court on the matters alleged, or to challenge this Order in its entirety as issued by the Board, and waives any other cause of action related thereto or arising from said Order.
- 4. The Order is not effective until approved by the Board and signed by its Executive Director.
- 5. All admissions made by Respondent are solely for final disposition of this matter and any subsequent related administrative proceedings or civil litigation involving the Board and Respondent. Therefore, said admissions by Respondent are not intended or made for any other use, such as in the context of another state or federal government regulatory agency proceeding, civil or criminal court proceeding, in the State of Arizona or any other state or federal court.
- 6. Upon signing this agreement, and returning this document (or a copy thereof) to the Board's Executive Director, Respondent may not revoke the consent to the entry of the Order. Respondent may not make any modifications to the document. Any modifications to this original document are ineffective and void unless mutually approved by the parties.
- 7. This Order is a public record that will be publicly disseminated as a formal disciplinary action of the Board and will be reported to the National Practitioner's Data Bank and on the Board's web site as a disciplinary action.
- 8. If any part of the Order is later declared void or otherwise unenforceable, the remainder of the Order in its entirety shall remain in force and effect.
- 9. If the Board does not adopt this Order, Respondent will not assert as a defense that the Board's consideration of the Order constitutes bias, prejudice, prejudgment or other similar defense.

.Any violation of this Order constitutes unprofessional conduct and may result

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